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VIA EXPRESS MAIL #EL002127208US

April 21, 1999

Commissioner of Patents and Trademarks BOX PATENT APPLICATION Washington, D.C. 20231

Re: A New Patent Application Converting the Provisional Serial No. 60/100,248 Filed 09/14/98 By Hillel Gazit

Sir:

Herewith by EXPRESS MAIL is this patent application, three sheets of drawings and an Assignment for recording, along with Forms PTO/SB/17, 21 & 1619A.

Also herewith is a check, total \$800.00 (the Filing Fee of \$760.00 and the Recording Fee of \$40.00). A duplicate of this letter is enclosed.

Respectfully submitted,

Douglas M. Clarkson Req. No. 18,583

Attach.

CERTIFICATE OF EXPRESS MAILING

under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as EXPRESS MAIL, #BL002127208US, postage prepaid, in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231 on ______April 21, 1999 ____.

Douglas M. Clarkson, Registration No. 18,583

Date:

These are the fees effective October 1, 1997. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12 See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$)800.00

Complete if Known				
Application Number				
Filing Date				
First Named Inventor	Gazit, Hillel			
Examiner Name				
Group / Art Unit				
Attorney Docket No.	04/119801			

User ID

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDIT	TIONAL FE	ES	
indicated fees and credit any over payments to	Large Entit	ty Small Entity Fee Fee		
Deposit	Code (\$)		Fee Description	Fee Paid
Account Number	105 130	205 65	Surcharge - late filing fee or oath	
Deposit Account Name	127 50	227 25	Surcharge - late provisional filing fee or cover sheet.	
Charge Any Additional Charge the Issue Fee Set in	139 130	139 130	Non-English specification	
Fee Required Under 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance	147 2,520	147 2,520	For fiting a request for reexamination	
2. Payment Enclosed:	112 920	112 920*	Requesting publication of SIR prior to Examiner action	
Check Order Other	113 1.840	113 1,840	Requesting publication of SIR after Examiner action	
	115 110	215 55	Extension for reply within first month	
FEE CALCULATION	116 400	218 200	Extension for reply within second month	· · · · · · · · · · · · · · · · · · ·
1. BASIC FILING FEE	117 950	217 475	Extension for reply within third month	
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	118 1,510	218 755	Extension for reply within fourth month	
Code (\$) Code (\$)	128 2,060	228 1,030	Extension for reply within fifth month	
101 790 201 395 Utility filing fee 760.00	119 310	219 155	Notice of Appeal	
106 330 206 165 Design filing fee	120 310	220 155	Filing a brief in support of an appeal	
107 540 207 270 Plant filing fee	121 270	221 135	Request for oral hearing	·
108 790 208 395 Reissue filing fee	138 1,510	138 1,510	Petition to institute a public use proceeding	
114 150 214 75 Provisional filing fee	140 110	240 55	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 760.00	141 1,320	241 660	Petition to revive - unintentional	·
2. EXTRA CLAIM FEES	142 1,320	242 660	Utility issue fee (or reissue)	·
Fee from Extra Claims below Fee Paid	143 450	243 225	Design issue fee	
Total Clair 8 1 1 -20 = O X =	144 670	244 335	Plant issue fee	
Independent 3 - 3** = O x ==	122 130	122 130	Petitions to the Commissioner	
Multiple Dependent	123 50	123 50	Petitions related to provisional applications	
**or number previously paid, if greater, For Reissues, see below	126 240	126 240	Submission of Information Disclosure Strnt	
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40	581 40	Recording each patent assignment per property (times number of properties)	
103 22 203 11 Claims in excess of 20	146 790	248 395	Filing a submission after final rejection	40.00
102 82 202 41 Independent claims in excess of 3	149 790	249 395	(37 ČFR 1.129(a))	
104 270 204 135 Multiple dependent claim, if not paid			For each additional invention to be examined (37 CFR 1.129(b))	
109 82 209 41 ™ Reissue independent claims over original patent	Other fee (sp	ecify)		
110 22 210 11 [∞] Reissue claims in excess of 20 and over original patent	Other fee (specify)			
SUBTOTAL (2) (\$)	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$40.00			
SUBMITTED BY Complete (if applicable)				
Typed or				
Printed Name Douglas M. Clark	son		,	8,583
Signature Day 1	.0.	1000	Deposit Account	

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents. Washington, DC 20231.

Please type a plus sign (+) inside this box>	+

TRANSMITTAL

PTO/SB/21 (12-97)
Approved for use through 9/30/00. OMB 0651-0031
Patent and Tradornark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number			
Filing Date			
First Named Inventor	Gazit,	Hillel	
Group Art Unit			
Examiner Name			,
Attorney Docket Number	01./1108	O1	

FORM		First Named Inventor	G	azit,	Hille	: 1	
(to be used for all correspondence after initial filing)		Group Art Unit					
		_	Examiner Name				
Total Number o	of Pages in This Subm	ission 2	Attorney Docket Numbe	r O	4/1198	01	
		ENCLOS	SURES (check all that ap	ply)			
Fee Transm	nittal Form	Assignm (for an A	nent Papers Application)		After Allow to Group	ance Com	munication
Fee /	Attached	Drawing				mmunication	on to Board erences
Amendmer	nt / Response	Licensin	ng-related Papers		1 ''	mmunicatio	on to Group
Afte	r Final	Petition and Acc	Routing Slip (PTO/SB/69) companying Petition		1	y Informati	
Affic	davits/declaration(s)	To Conv	vert a anal Application		Status Le	tter	
Extension of	of Time Request	Power	of Attorney, Revocation of Correspondence			l Enclosure <i>lentify belo</i>	
Express Ab	andonment Request		al Disclaimer		Return	Post	Card
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			st for Refund				
Document(opy of Priority (s)	Remarks					
	to Missing Parts/ Application		-				
السا Part	ponse to Missing s under 37 CFR or 1.53						
	SIGNATU	RE OF APPLI	CANT, ATTORNEY, OR	AGE	NT	,	
Firm or Individual name		Dougl	as M. Clarkson				
Signature	Ro	aglas	M Clark		3		
Date		4-2	1-99		<u>, </u>		
			ATE OF MAILING				
I hereby certify the envelope address	at this correspondence ed to: Assistant Comr	s is being deposi	ited with the United States Pents, Washington, D.C. 2023	ostal : 31 on	Service as fi this date:	rst class ma	
Typed or printed	name	Douglas	M. Clarkson				
Signature	10		Call Date		4 71	-90	١.

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